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				_	april	6,20	009	(Date)		
APPLICATION NO.	FILING DATE	ГЕ		FIRST NAMED INVENT	TOR	ATTORN	EY DOCKET NO.	CONFIRMATION NO.		
09/674,597	04/09/2001					00:	537-169002	1308		
TITLE OF INVENTION	: PTH2 RECEPTOR SE	LECTIVE	COMPOUND	s						
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Change of correspo	ondence address (or Cha	nge of Cor	respondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to						
Number is required.	2 of more recent) attach	ea. Use or	a Customer	2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3 Tony K. Uhm						
. ASSIGNEE NAME AT	ND RESIDENCE DATA	TO BE P	RINTED ON T	HE PATENT (print or	type)					
PLEASE NOTE: Unle recordation as set forth	ess an assignee is ident in 37 CFR 3.11. Com	fied below	, no assignee	data will appear on the	patent. If an assign	nee is ident	ified below, the docu	ment has been filed for		
(A) NAME OF ASSIC	NEE Conseils de Re			(B) RESIDENCE: (CI	TY and STATE OR (COUNTRY)			
d'Applicati	ons Scientifi	ques S	S.A.S.	PARIS, FRAI	NCE					
Beth Israel lease check the appropri	ate assignee category or	categories	(will not be pri	BOSTON, MA nted on the patent):	USA □ Individual ☑ C	orporation	or other private group	entity Government		
a. The following fee(s) a	re submitted:		4b	Payment of Fee(s): (P	lease first reapply a	ny previou	sly paid issue fee sho	wn above)		
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				b. Applicant is no le	onger claiming SMA	LL ENTIT	Y status. See 37 CFR	1.27(g)(2).		
terest as shown by the re	cords of the United Stat	es Paterit a	nd Trademark	Office.	i tile applicant; a regi	stered attor	ney or agent; or the a	ssignee or other party in		
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his collection of informa application. Confidenti	tion is required by 37 Clality is governed by 35	FR 1.311. 7 U.S.C. 122	The information	is required to obtain o	r retain a benefit by the	he public w	hich is to file (and by	the USPTO to process)		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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DAWN JANELL BIOMEASURE IN 27 MAPLE STREE	90 03/10 .E AT IC. ET	/2009	APR v 6 2009 4	Fee(s) Transmittal. The papers. Each addition have its own certificate. Ce I hereby certify that the control of the control o	al paper, such as the of mailing or tr rtificate of Mailing his Fee(s) Transmis Fee(s) Transmis Fee	an assignment ansmission. Ing or Transmittal is being	deposited with the Unite t class mail in an envelop above, or being facsimil ate indicated below.
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	ror	ATTORNEY DO	CKET NO.	CONFIRMATION NO.
09/674,597	04/09/2001		Zheng Xin Dong		00537-16	9002	1308
TITLE OF INVENTION: P	TH2 RECEPTOR SE	LECTIVE COMPOUND	s				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	E FEE TOTAL	FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$0		\$1510	06/10/2009
EXAMINE	ER	ART UNIT	CLASS-SUBCLASS	7			
WEGERT, SAN	NDRA L	1647	530-300000				
1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNITY Society de Coud'Application	ence address (or Char 22) attached. ion (or "Fee Address' or more recent) attach RESIDENCE DATA an assignee is identi 37 CFR 3.11. Comp	Indication form ed. Use of a Customer TO BE PRINTED ON fied below, no assignee letion of this form is NO	(1) the names of upor agents OR, altern (2) the name of a segistered attorney 2 registered patent listed, no name will THE PATENT (print or data will appear on the	ingle firm (having as a or agent) and the namattorneys or agents. If be printed. type) e patent. If an assign an assignment. ITY and STATE OR (a member a 2 less of up to no name is 3	Alan F	Richardson Feeney Uhm cument has been filed fo
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4a. The following fee(s) are a Issue Fee Publication Fee (No si	submitted: mall entity discount p Copies 2	BOSTON, MA LISA printed on the patent): Individual Corporation or other private group entity Government of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0590 (enclose an extra copy of this form).					
5. Change in Entity Status (a. Applicant claims SM		=	☐ b. Applicant is no	longer claiming SMAI	LI FNTITY state	is See 37 CF	R 1 27(p)(2)
NOTE: The Issue Fee and Pu	iblication Fee (if requ	ired) will not be accepted	d from anyone other tha				
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Typed or printed name	Alan F. Feen	iey /	/	Registration N	6. 43,6	09_/	
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